

# **Balanced Score Card MHS Metrics**

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- **MHS Strategic Plan/Balanced Scorecard**
- **MHS Metrics Programs**
- **Metrics Standardization**



#### MHS GOALS

- Improve service to external customers: Our customers are the Armed Forces and all those entrusted to our care.
- **Enhance financial stewardship:** Accomplish our mission in a cost effective manner that is visible and fully accountable.
- Improve Readiness: Focus on activities to enhance readiness of military forces and the medical assets that support them.
- **Improve Quality: Ensure benchmark standards for health and health care are met.**
- Improve Efficiency: Obtain maximum effectiveness from the resources we are given.
- Value our internal customers and leverage technology: Our people and our support systems are critical to giving us the capabilities to execute on all we set out to achieve.



## MHS Strategic Planning - Balanced Scorecard

At the highest level, the Balanced Scorecard is a <u>framework</u> that helps organizations <u>translate</u> <u>strategy</u> into <u>operational objectives</u> that drive both behavior and <u>performance</u>.



# Why the MHS is Using the Balanced Scorecard

- Translates a strategy into operational terms
- Ensures that the components of the strategy—the objectives, measures, & initiatives are aligned and linked
- **©** Communicates the strategy throughout the MHS
- Forms the basis of an effective and integrated strategic management process







To Deliver Customer Drive Financial Satisfaction...

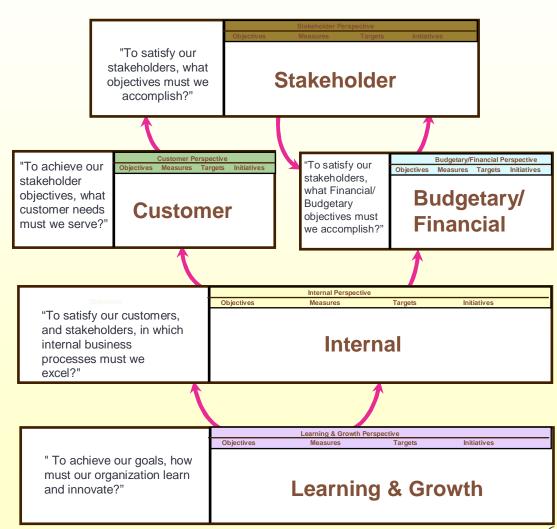
Responsibility...



To Build the Strategic Capabilities..

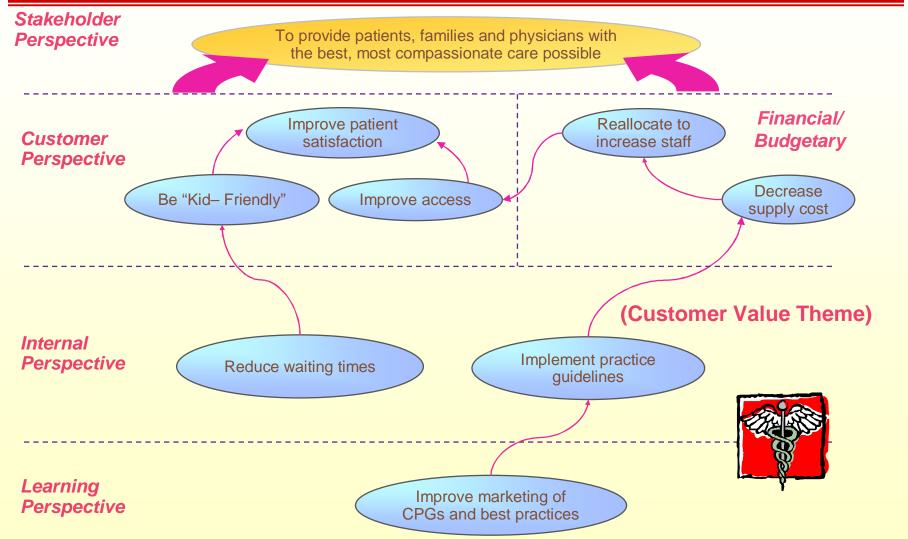


**Equip our People...** 





## Strategic Objectives Form a Theme Through a Set of Cause and Effect Relationships

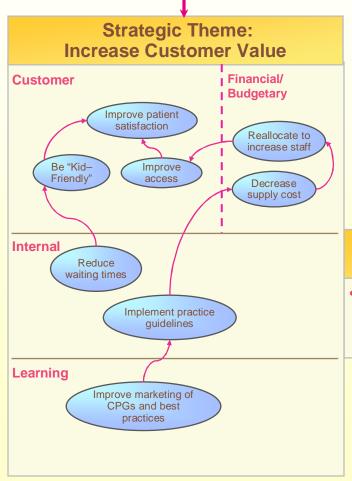




# **Balanced Scorecard Components**

#### **Strategy Map:**

Diagram of the cause-and-effect relationships between strategic objectives



#### **Objectives:**

Statement of what strategy must achieve and what's critical to its success

#### Measures:

How success in achieving the strategy will be measured and tracked

#### **Targets:**

The level of performance or rate of improvement needed

#### **Initiatives:**

Key action programs required to achieve objectives

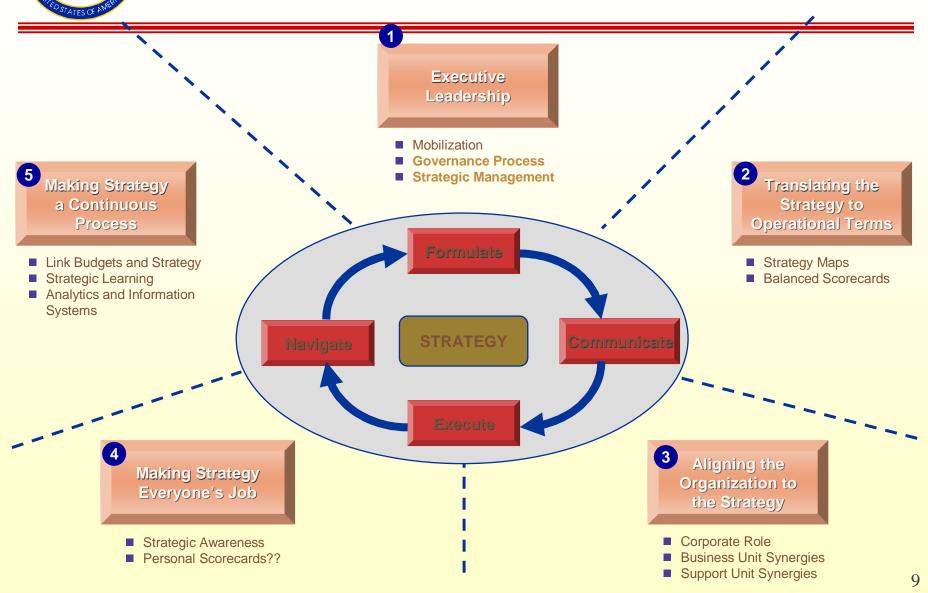
Objective	Measure	Target	Initiative
Reduce waiting times	<ul> <li>Average emergency room wait time</li> </ul>	• 30 minutes	Emergency room expansion



**Children's Hospital Case (example)** 

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## The Ultimate Goal is to Become a Strategy Focused Organization



# MHS Strategic Plan



### **Mission and Vision**

#### Mission

To enhance DoD and our Nation's security by providing health support for the full range of military operations and sustaining the health of all those entrusted to our care

#### Vision

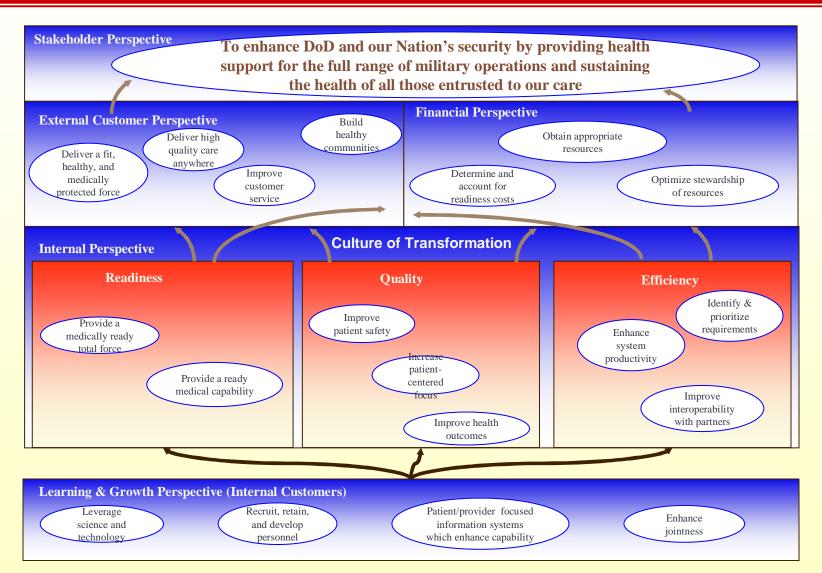
A world-class health system that supports the military mission by fostering, protecting, sustaining and restoring health.

#### Destination

24-star endorsement of medical program



## **Strategy Map for Transforming the MHS**





## **Theme Sponsors**

Stakeholder Perspective

Dr. Winkenwerder, Mr. Wyatt,
Maj Gen Randolph, RADM Mateczun

External Customer Perspective

Mr. Wyatt, Ms. Embrey, Dr. Tornberg
Mr. Spruell, RADM Carrato

Financial Perspective
Mr. Wyatt, Mr. Ford, Lt Gen Taylor,
LTG Peake, VADM Cowan

Internal Perspective

Readiness	Quality	Efficiency
Ms. Embrey, LTG Peake, RADM Mateczun	Dr. Tornberg, VADM Cowan	Mr. Ford, Lt Gen Taylor

Learning & Growth Perspective (Internal Customers)

Mr. Reardon, LTG Peake, Dr. Zimble



## **MHS Strategy Architecture**

**Stakeholder Perspective:** Our stakeholders are the American people, expressed through the will of the President, Congress, and the Department of Defense

#### **External Customer Perspective:**

Our customers are the Armed Forces and all those entrusted to our care

**Financial Perspective:** Accomplish our mission in a cost effective manner that is visible and fully accountable

#### Readiness Theme

Focus on activities to enhance readiness of military forces and the medical assets that support them

## **Quality Theme**

Ensure benchmark standards for health and health care are met

## **Efficiency Theme**

Obtain maximum effectiveness from the resources we are given

#### Learning and Growth Perspective (Internal Customers): Our

people and our support systems are critical to giving us the capabilities to execute on all we set out to achieve.



## **Learning & Growth Perspective:**

## "In Order to Execute Our Internal Processes, With What Skills and Tools Must We Equip Our People?"

#### **Objectives**

Leverage science and technology

Recruit, retain, and develop personnel Patient/provider focused information systems which enhance capability

Enhance jointness

Objective	Measures	Stretch Target	Initiatives
L&G-1: Leverage science and technology	% of R&D projects appropriately tied to strategic objectives	100%	-Bring metric results to attention of TARA Chairs and develop method to make them aware of MHS strategic objectivesDefine what we are trying to accomplish (define, link, communicate)
L&G-2: Recruit, retain, and develop personnel	-Fill rate (selected specialties) -Employee Satisfaction (unified survey)	-95% (critical shortages) -TBD	-Energize / resource ULB team to push incentives -Develop MHS program for recruitment and retention (potentially identifying policy issues and changes)
L&G-3: Patient/provider focused information systems which enhance capability	-% of patient encounters documented in the CHCSII system -Number of online appointments	-100% -7.5 million Appts	-Conduct limited deployment of the CHCS II system -Deploy TRICARE online
L&G-4: Enhance Jointness – optimize the way that we assign resources	# of unfilled MHS billets where other service overages exist	Zero	-Develop Tri-Service process for inter-Service resource sharing where possible and appropriate -Create a Task Force to make recommendations with milestones and plans to focus on Educational Experience, How we use flags, etc



# Internal Perspective: Readiness Theme

#### **Objectives**

Provide a medically ready total force

Provide a ready medical capability

Objective	Measures	Stretch Target	Initiatives				
R-1: Provide a medically ready total force	-Individual medical readiness + Adequate (meets service regulations for deployability) + Optimal (deployable without medical intervention) -% completeness individual database entries	+80% of personnel medically ready to deploy +60% of personnel medically ready to deploy -95% database entries complete	-Develop, implement, and monitor individual medical readiness to deploy indicators -Develop, implement, and monitor individual medical readiness to deploy indicators for Guard and Reserve -Implement an integrated, comprehensive DoD medical surveillance system				
R-2: Provide a ready medical capability	-% SORTS reportable OPLAN-tasked medical units reporting C1 or C2 -% requirements defined	-85 % of on-hand assets can execute tasking -90% defined	-Ensure policy development and financial influence supports OPLAN taskings -Define common core medical requirements for joint medical response operations, including related training, equipment and exercise standards				



# Internal Perspective: Quality Theme

#### **Objectives**

Improve patient safety

Increase patientcentered focus Improve health outcomes

Objective	Measures	Stretch Target	Initiatives
Q-1: Improve patient safety	# of near misses (good catches) divided by total reported cases	TBD (no civilian benchmark available)	-Establish a process to share results of aggregate data analysis of near misses and actual events with both leadership and the field -Purchase and deploy Taproot across MHS -Link MedMARx between facilities and across services
Q-2: Increase patient- centered focus	- Satisfaction with encounter - Access (ease of getting an appointment)	90% (satisfied), 50% (hi satisfied) 80 <sup>th</sup> percentile for civilian plans (MHS phone access—internal std)	-Establish process to examine benchmark organizations to (and) share successful techniques and ideas with leadership and the fieldBe the provider of choice for OB Services -Implement Access to Care OIPT recommendations.
Q-3: Improve health outcomes	# preventable admissions	Create a self benchmark	Establish a process to evaluate data and determine causes of any significant differences (positive or negative) between MHS and benchmark data



# Internal Perspective: Efficiency Theme

#### **Objectives**

Improve interoperability with partners

Enhance system productivity

Identify & prioritize requirements

Objective	Measures	Stretch Target	Initiatives
E-1: Improve interoperability with partners	-Value of DoD/VA Sharing	\$100Mil FY03	-Quantify and qualify where sharing agreements exist (to include formal and informal arrangements) -Identify best practices in DoD/VA resource sharing - Establish criteria for administration and management of the Joint Incentive Fund
E-2: Enhance System Productivity	-RVU per FTE -Clinical availability of provider -Hospital occupancy rate -Days per 1000 beneficiaries -Prime Leakage -Cost/RVU	= to or > 18.5 = to or > 80% = to or > 80% = or < 195 = to or < 30% TBD	-Develop, implement, and monitor provider availability, RVU/FTE and support staff/facility support standardsDevelop defined methodology and thresholds and monitor hospital occupancy and inpatient admission rates of MHS. Adopt bed counting methodology - Develop methodology to assess prime leakage -Develop methodology and monitor cost of both direct and private sector care for MTF enrollees.
E-3 Identify & prioritize requirements	PA&E Study (completion of study and establish measures)	Staff and fund 100% of justified readiness requirements	Respond to PA&E Study by developing a methodology to staff and fund all justified readiness requirements



# **External Customer Perspective:**"What Do Our Customers Expect of Us?"

#### **Objectives**

Deliver a fit, healthy, and medically protected force

Deliver high quality care anywhere

Improve customer service

Build healthy communities

Objective		Stretch Target	Initiatives
C-1: Deliver a fit, healthy, and medically protected force	See R-1	See R-1	See R-1
C-2: Deliver high quality care anywhere	Industry-Based Quality Outcome Measures	-9 of the 9 metrics meet target	-Implement TRICARE Global Remote overseas healthcare contract -Clinical Quality Forum will develop and present a plan to improve the 9 quality measures -Implement Clinical Practice Guidelines across the MHS (90% of MTFs will implement the first 5 CPGs)
C-3: Improve customer service	Satisfaction with Health Plan	65% (Civilian 80 percentile) (21.2% Hi-Sat)	-Increase electronic submission of claims -Improve customer relations management strategy via T-Nex and new TIC contract
C-4: Build healthy communities	Population health 2010 metrics	Meet 11 of 11 metrics	-The Population Health Team will develop and present a plan to improve the 11 PHI metrics -Develop web-based population health support center



# Financial Perspective: "What Do Our Stakeholders Expect of Us?"

#### **Objectives**

Determine and account for readiness costs

Obtain appropriate resources

Optimize stewardship of resources

Objective	Measures	Stretch Target	Initiatives
F-1: Determine and account for readiness costs	-Cost of Readiness	TBD	Identify specific readiness related costs and resolve any disconnects between the top down and bottom up review of financial data and respond to PA&E Study.
F-2: Obtain appropriate resources	-% of DHP budget growth within accepted national healthcare inflationary index - real property life-cycle maintenance and capital equipment maintenance	-Annual growth DHP aligns w/ Annual Growth of Medical consumer Price Index (MCPI) -Bldg 30 Years, Maj Equip 7-10 Years, Minor Equip 3-5 Years	-Identify health care resource requirements based on historic trends and industry forecasts to assist budget development.  -Develop methodology and provide report of MHS facilities and equipment replacement timelines consistent with health care industry benchmarks.
F-3: Optimize stewardship of resources	-Healthcare Efficiency of the MHS (\$ output/\$ input) -Healthcare Efficiency of the Direct Care System (\$ direct care output/\$ direct care input)	TBD TBD	Increase the care/cost ratio of MHS and DCS



# Stakeholder Perspective: "What Does Our Stakeholder Expect of Us?"

#### **Objectives**

To enhance DoD and our Nation's security by providing health support for the full range of military operations and sustaining the health of all those entrusted to our care

Objective	Measures	Stretch Target	Initiatives
S-1: To enhance DoD and our Nation's security by providing health support for the full range of military operations and sustaining the health of all those entrusted to our care	JCS satisfaction with medical support	24 star endorsement of medical program	Produce a validation document for service chief signature



## Why do we need Metrics?

#### **We Have To**

• Government Performance and Results Act of 1993

#### **We Want To**

• Measure compliance with policies and strategic direction of leadership



# What are we trying to measure?

## Metrics must be tied to strategic vision

- What is the mission?
- How and when will it be accomplished?
- What are the markers of accomplishment?
- How does one measure these markers?



## Many Audiences! One Mission?

- **Congress**
- OMB
- **SECDEF**
- **USD(P&R)**
- **HA**

- TMA
- **Army**
- **Navy**
- **Air Force**
- **Lead Agents**



# Current Metrics Programs

- **Government Performance and Results Act (GPRA)**
- **OMB Common Measures**
- **DHP Performance Contract w/DEPSECDEF**
- DodD Balanced Scorecard
- **Monitoring the Status of the Force**
- **Quality of Life**
- **MHS Executive Review (MHSER)**
- Service and LA specific programs



## **Recent Metrics Requests**

#### **SECDEF Balanced Scorecard**

- Request from Senior Executive Council (SEC)
- 10-12 P&R Metrics
- HA Metrics
  - Satisfaction with Health Plan and Health Care\*
  - Physician and MTF productivity\*
  - Purchased care cost\*



## **Standard Metric Set**

Balanced Scorecard Metrics										
Perspective	Theme	O b je c tiv e		M easure	Perf.	Instrument				Lowest
CISPCCIIVC	11101110	O b je e tiv e		m cusurc	Contract	Panel	MHSER	SECDEF	Frea	Level
		Fit Force	C -1							
External		High Quality Care	C -2	Quality Outcome Measures					Q	Svc,Reg
Customer		C u s to m er Service	C -3	Satisfaction with Health Plan	X	X		X	Q	Svc,Reg
		Healthy Communities	C -4	Healthy People 2010	Х	Х			Q	MHS
		Determine and Account for								
		Readiness	F - 1	Determine and Account for Readiness					A	мнѕ
		O b tain Appropriate								
Financial		Resources	F - 2	Obtain Appropriate Resources					A	MHS
				% DHP Budget Growth  Efficiency of MHS					A	MHS
		Optim ize Stewardship	F-3	Efficiency of M H S					A	MHS
			1 -3	Linciency of Birect care					_	WIIIS
		M edical Ready Total Force	R -1	In dividual Medical Readiness					?	Svc
	Readiness	wiedical Keady Total Force	R -1	M edical Surveillance System					?	?
	i caumess	M edical Capability	R -2	SORTS					Q	Svc
			R -2	Common Core Medical Requirements	-				Α	MHS
		Patient Safety	Q -1	Near misses					Q	MHS
		Patient Centered	Q -2		X	X	x	x	Q	Svc,Reg
	Q u a lity	T A LICH L O CHILCIEU	Q -2	Satisfaction with Access	x	X	x	x	Q	Svc,Reg
		Health Outcomes	Q -3	Number of Preventable Admissions	X				Q	MTF
Internal		Interoperability with	E -1	Number of DoD/VA Sharing Agreements					?	MHS
		partners	E -1	DoD/VA Joint Procurement Dollars			V		A	MHS
		iency System productivity	E -2 E -2	R V U / F T E Clinical Availability of Providers	Х	X	X	X	M	MTF
			E -2	Occupancy Rate					M	MIF
	Efficiency		E -2	In patient Days/1000	X	X	X		Q	MITE
			E -2	Prime Leakage/Outpatient Marketshare	X	X	X	X	M	MTF
			E -2	Cost per APG		X			М	MTF
			E -2	M edical Cost per Enrollee	X	X		X	М	MTF
		Identify and prioritize							١.	
		requirem ents	E -3	Identify and prioritize requirements					Α	мнѕ
		Leverage Science and			1					
		T e c h n o l o g y	L & G -1	% R&D tied to Strategic Objectives					Α	мнѕ
			L & G - 2	Fill Rate					Α	MHS
Learning &		Recruit, retain, develop	L & G - 2	Em ployee Satisfaction					Α	Svc
Growth		Patient/Provider based	L & G - 3							
		systems	L & G - 3	% patient encounters in CHCSII					M	MTF
		Jointness	L & G - 3	Unfilled billets with other services overages					A	MIF
		001111111111111111111111111111111111111	L u U - 4	o in time a billets with other services everages						
				Instrument Panel Metrics not	t on the	Balanced	Score	card		
Perspective	Theme	O b je c tiv e		M easure	Perf.	In strum ent				Lowest
					Contract	Panel		SECDEF		Level
External				Enrollees	X	X	X		M	MTF
Customer		Customer Service		Claims Processing Telephone Inquires	Х	X	Х		М	Reg
				Total R V U s	х	X	X		М	MTF
				Total R W Ps	1 x	X	1 x		M	MIF
				Cost per R W P	,	X	,,			
Internal		System productivity		Primary Care RVUs/Enrollee		X				
				Panel Śize		Х				
				Inpatient Marketshare	Х	Х	Х		М	MTF
				Catchment Area Purchased Care Costs	Х	X	X		M	MTF



## Metrics Standardization Board

- **TriService Board tasked to standardize measures** 
  - Multiple efforts within HA/TMA, Services, Lead Agents
- **Started with Performance Contract and MHSER**
- **Multiple communities, Multiple interests**
- Need to agree on definition, data source
- **Reengineer old programs**
- **Becomes source for new requests for metrics**



# Metrics Standardization Board

#### **Service Representatives**

- Army LTCOL Dott Smith
- Navy LCDR Mark Turner
- Air Force LtCol Rick Reichard

#### Supported by Triservice Metrics Working Group

Technical Experts



## **Conclusion**

- Senior leadership vision drives mission and forms basis for metrics
- Measures should use same data and same methodology
- **©** Consistent metrics lead to clear and consistent message for both internal and external customers